## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000072567

1. Corporation Name

BANYAN CONSULTING, INC.

## **FILED** Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90147 013 \*\*\*150.00



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Principal Place	of Business	Mailing Address				[ 1991/991 IIV 1917 1991 9911 4	#111 BP111 ##1	76 14818 11881 BISTO	#1(1) ( <b>09</b> ) ( <b>09</b> )
1937 CAROLINA AVENUE N.E. 1937 CAROLINA AVENUE N. ST. PETERSBURG FL 33703 ST. PETERSBURG FL 33703						DO NOT WR	ITE IN TH	IS SPACE	
					<u> </u> -	3. Date Incorporated or Qualifed			
						08/15/1997			
2. Principal Pl						lied For			
21 3031	ZND ST. N.	26 3031 ZNO ST. N.				59-3474854		No:	Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A	dditional	
22		27	·]			5. Certificate of Status Desired Fee Required			quired
City & State	\ <del>_</del> _	City & State  28 ST. VETER'S BURG FL				6. Electic n Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees			,
23 51, 7	ETCREBURY, FL					Trust Fund Contribution	<del></del> -		rees
Zip	Country Country	Zip	Coui	ntry '	1	8. This corporation owes the cu	rent year I		<b>⊠</b> No
24	55/07[25]	29 33704 31	<u>0]</u>			Personal Property Tax.  O. Name and Address of New	Penisteru		360
	9. Name and Address of Current	Registered Agent		81 Name					
UED.	TEL, G. FREDERICK III			- i (Mairie	CER	TEL-, G. FREDE		<u> </u>	
1937 CAROLINA AVENUE N.E.				82 Street	Address	(P.O. Box Number is Not Accep	table)		
ST. PETERSBURG FL 33703				83	<u>031</u>	ZNO SI, U,			-
. ວເ. <b>ເ</b>	LILINGOUNG IL 33703			03					
				84 City	- 0:	77.000.00		85 Zip C	ode .
					57. Y	ETERSBURG		ct changing its	704
11. Pursuant to	to the provisions of Syltions 607.0502 egistered agent, or both, in the State of m familiar with and accept the obligat	and 607.1508, Florida Statutes, If Florida. Such change was auth	, the at horized	bove-named by the corp	oration's	board of directors. I hereby acce	ept the app	ointment as reç	istered
agent. I ar	m familiar with and accept the obligat	ons of, Section 607.0505, Florid	la Statu	ites.			ن ندد	7 -00	
SIGNATUF:E	_9/1/A						_7 -1	3-99	
	Signature, typed or printed name of registered agen.  OFFICERS ANI.		egistered 13.	Agent signature i	red lired whe	ADDITIONS/CHANGES TO O			RS IN 12
TITLE	OFFICERS AIN.	DELETE	1,1 TIT	LE	<b>⊤</b> 5−	TIDBITI SITURE CONTINUES TO C		Change	Addition
!	OERTEL, G. FREDERICK III	<b>_</b>	1.2 NA		CER	TEL, G. FREDERICK	111	/	
NAME	ACCT CARCULATE AND			REET ADDRESS		12NOST. N.			
STREET ADORESS	ST. PETERSBURG FL 33703					PETERS BURG, FL	- 33	704	
CITY-ST-ZIP TITLE	SI. PETERSBURG PE 33703	□ DELETE 2.1			+ <i>-</i> −	<u> </u>		Change	Addition
! I		B *****	2.2 NA						
NAME				REET ADDRESS					
STREET ADDRESS				TY-ST-ZIP	1				i
CITY-ST-ZIP		√ DELETE	3.1 711		┼			Change	Addition
TITLE		٠, , , , , , , , , , , , , , , , , , ,	3.2 NA						
NAME				REET ADDRESS					
STREET ADDRESS				TY-ST-ZIP	'				
CITY-ST-ZIP		DELETE	4.1 TII		+			Change	Addition
TITLE		_ DECE IC	4.111 4.2 NJ			<b>V</b>		•	_
NAME									)
STREET ADDRESS				REET ADDRESS	,				
CITY-ST-ZIP		☐ DELETE	5.1 TI	TY-ST-ZIP	+			Change	Addition
TITLE		الما ما م	5.2 NA						
NAME				REET ADDRESS	; l				
STREET ADORESS			1	ry-ST-ZIP	1				}
CITY-ST-ZIP	<u> </u>	DELETE	6.1 TIT		+			Change	Addition
TITLE			6.2 NA					<u> </u>	_
NAME				REET ADDRESS	,				
STREET ADDRESS				TY-ST-ZIP					
CITY-ST-ZIP			0.4 CI	11-01-48					

CITY-ST-ZIP 14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07 (3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or or adjusted ment with an address, with all other like empowered.

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICE TOR DIRECTOR

727-818-coze

Daytime Phone #